



COLORADO

Department of Health Care
Policy & Financing

MINUTES
Nursing Facility Advisory Council
Department of Health Care Policy and Financing

303 E. 17th Avenue
7th Floor Conference Room 7B
Denver, CO 80203

April 15, 2015
3:15 p.m. – 4:45 p.m.

On the Phone

Anne Meyer - LTC Ombudsman
Shannon Gimble - DRCOG
Paul Landry - Life Care Center
Chris Osbourne - Colauria
Dustin Dodson
Trish Oiler - Manor Care
Mary Koertke - Vivage
Pam Purcell - Sava Senior Care
Jennifer Reeves - DRCOG

ATTENDEES—

Arlene Miles	Capitoline Consulting
Sara Dent	Saint Paul
Janice Brenner	Leading Age Colorado
Jennifer Reinheimer	Myers & Stauffer
John Brammeier	Vivage
Joyce Humiston	C&G Health Care
Josh Fant	CHCA
Lonnie Hilzer	Continuum Health Management
Julie Farrar	ColoDD Council
Sarah Schumann	Brookside Inn
Janet Snipes	Holly Heights
Doug Farmer	CHCA
Wayne Sanner	Sava Senior Care
Brenda Jenson	Bamboo Castle
Wayne Sanner	Sava Senior Care Consulting, LLC.

STATE STAFF

Jason Takaki	HCPF
Cathy Fielder	HCPF

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while demonstrating sound stewardship of financial resources.
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Joana Vasquez	HCPF
Kathy Snow	HCPF
Brian Ray	HCPF
Whitney Ray	HCPF
Matt Haynes	HCPF
Tim Cortez	HCPF
Kathy Cebuhar	HCPF
Randie Wilson	HCPF
Sam Murillo	HCPF
Anthony Satariano	HCPF
Beverly Hirsekorn	HCPF

I. Jason Takaki (HCPF) - Welcome and Introductions

- a. Phone introductions, conference room introduction

Note: Meetings are recorded strictly for utility purposes, after the meeting is over, the minutes are transcribed and the recording is deleted

- i. Minutes for March were approved by the group

- b. Introductions:

- i. **Sam Murillo:** New CCT Director at HCPF, health advocacy background and direct advocacy work, will be taking over for Tim Cortez. Tim will be moving to the Community Options Team. CCT is a grant funded operation, and Sam will be managing the transitions.

- ii. **Whitney Ray:** Temporary Staff member on the Supportive Living Options team.

II. Randie Wilson in Rates (HCPF)- FRV Update

- a. Check to accounting to NVC has been sent, 21 outstanding comments that need to be responded to, Randie will send out e-mail that NF's appraisals are finalized, including the date of when to file an IDR.
- b. 125 finalized appraisals, Meyers and Stauffer finalized 82 of them, and rate letters are beginning to go out. Received 44 comments. 6-8 total revised appraisals, resulting from the comment period. One dispute resolution received. May have additional revisions from NVC about the appraisals, since there are 21 outstanding comments remaining to address.
- c. Scheduling IDR's this month, and beginning of May.



- d. Facilities instructed to complete the RFP Appraisal guide for the new vendor. The Department will give everyone a month to respond, review the comments, the department will post it on the HCPF website, and include it in the next RFP's for the appraisal vendor.
- e. The Department will establish a workgroup to discuss the utility of the current FRV methodology and other related topics.
- f. Kickoff for the fair rental value workgroup was not determined.

III. Matt Haynes with Provider Rates (HCPF)- Provider Fee Program Update

- a. When FRV appraisals are done, Meyers and Stauffer can get the rates and audited rates done for 2014-2015, and the interim rates for 7-1-2015.
- b. The P4P are discussing the CCRT exemption; should there be an application process around the attestation process. The P4P subcommittee has been meeting and discussing for 2015-2016.

IV. Kathy Cebuhar (HCPF) for CCT Update

- a. For the last month, CCT has been finalizing their sustainability plan, and will be sending a report to CMS in April, addressing the CCT efforts for community transitions after the Colorado Choice Transitions (CCT) program that ends on December 31, 2018. The plan is to identify the services and supports and transitions that HCPF will sustain beyond the life of the grant, and will address the staffing that will continue to work on CCT for HCPF beyond the life of the grant. Plan is in internal clearance, after submitted to CMS, will be open to share.
- b. CCT has had 87 successful transitions out of nursing homes. The CCT advisory council continues to meet quarterly, and the council decided there was a need to create a work group or subcommittee on stakeholder engagement in the program.
- c. Subcommittee in CCT provided a survey to nursing facility social workers, and they received a positive number of responses, 182 responded to the survey.
- d. Final, the ADRC (Aging and Disabilities Resources for Colorado) contracts are starting to be finalized and executed with HCPF and rolling out in phases. The ADRC's will now be the new local contact agencies across the state as referrals for options counseling. If residents are indicating that they have interest in



wanting to return to the community, and are indicating "yes" on the MDS section Q. The ADRC's will be the point of contact when making those referrals and they will send their Options Counselor's to meet with residents in the facility and discuss with them what their options are.

- e. Three ADRC regions that are operational: Boulder County (region 3B), San Juan Basin (region 9): San Juan is covering Archuleta, Dolores, La Plata, Montezuma, and San Juan Counties), and region 13: the upper Arkansas triple A, covering Chaffee, Custer, Fremont, and Lake Counties.
- f. CCT will be sending a letter going out through internal clearance process that will be sent out to each facility unique to its each region. Letter will state who is point of contact is and the information going forward to provide to NF staff to utilize for making referrals.

V. Anthony Satariano (HCPF) on Pay for Performance Update:

- a. 127 applications received for 2015.
- b. PCG will be giving HCPF their on site visit list, and the Department will follow up with approximately 13 facilities to alert them that PCG will be giving them a visit to go over the application and visit their site.
- c. Pay for performance meetings are every two weeks, so that we can get the application out as soon as possible. PCG will be providing more information for the meetings.
- d. For the fiscal year of 2016, Meyers and Stauffer will be doing the paper performance contract beginning in July 2015.

VI. Jennifer Reinheimer (Meyers and Stauffer) Updates

- a. CHCA has offered to do the marketing for **M&S Cost Report Trainings:**
 - Denver: May 29, 2015
 - Pueblo: June 16, 2015
 - Durango: June 25, 2015
- b. Trainings are from 8:30-5:00, the afternoon is open for providers or cost report prepared for people to ask questions. CHCA advertises the M&S cost report training through their newsletter and signing up is through CHCA website.



Education contact list includes all facility members of the CHCA and not just CHCA members.

- c. Meyers and Stauffer hired a consultant that does peer views for **desk reviews**. According to M&S's engagements, there is audit standards (AU) and attestation standards (AT), the consultant referred to a "field audit", changing to a "field examination" under attestation standards. Desk review language is changing to "agreed upon review", instead of "agreed upon procedure". M&S will send out the same representation with proposed adjustments and have the provider representative sign off on the desk review form. Same procedures will be performed.
- d. Regarding **field audits**, originally M&S completed the field audit and the NF signed the cost report supplemental information statement in the field, and dated it the last day of field work. The change will be that when M&S sends out those mass adjustments, the facility will sign it upon receipt.
- e. For **rate calculations**, those are still agreed upon procedures, and no signed representation will be required for those. Everyone that has desk review performed or field audit performed has to sign these items. All the procedures for the desk review and field audit remain the same. M&S will be sending out a letter about the desk reviews and field audits, and post it on their website. CHCA will also send out.
- f. M&S received approval from HCPF to drop schedule G from the Med 13. The Med 13 was a form filling out your resident trust. M&S is posting a new template and it will be on the M&S website.

VII. Jason Takaki (HCPF) Site Visits

- a. Jason indicated that there is value having the Department staff visit various NF's. A discussion took place and it was agreed upon that we will arrange a couple of site visits over the course of the summer.

VIII. Jason Takaki (HCPF) The Change of Ownership Process

- a. Jason reiterated the importance of notifying the department regularly of Change of Ownerships. He highlighted the recent DAL (Dear Administrator Letter) related to the process.



IX. Jason Takaki (HCPF) Regulatory Review

- a. There was discussion about CDPHE's regulatory review process by current participants.

Comments for Jason about Regulatory Review:

Comment 1: With CDPHE, some rules are set very substantial. The CDPHE rules are very technical. Only a few people can read them and understand what they mean.

Comment 2: The health department in chapter 5 group, everyone knows the license and has their own piece. Not every administrator owns a piece of reimbursement. They all own what they have to do on a day to day basis to meet the licensing, but not on reimbursement, because you have the corporate offices that deal with that or a person who has their own section. It may be more difficult to get that effective of a group together, but the process is a good idea if you pull in the right brains. You won't get the same kind of interaction that the health department is getting, because all those people have technical reimbursement issues.

Comment 3: It has to be broken up into sections, billing, different people, etc; it's going to take more time because it's technical, difficult and complicated. There may be some easy fixes that could benefit everyone, need to verify what they are.

Comment 4 (with 5615 and Regulatory Review): the 5615's are very labor intensive, it should be automated, every other state automates their 5615, why does Colorado spend so much money to get one paper signed that has the income of the resident...etc; it's taking too much money and time, we would save Colorado a lot of time and money. This is one example, if we could drill into this and it would benefit all the stakeholders.

Comment 5: Process wise, breaking this out in component pieces with CDPHE, and setting a timeframe and sticking to it, and having the right people in the timeline is very helpful.

Comment 6: The timeline is helpful, for example: when the dieticians come, we discuss dietary. This process was fluid because the NF's knew what sections they were reviewing.

X. Tim Cortez (HCPF) Regulatory Efficiency/SEP Rule Changes

- a. Tim Cortez, oversees HCPF section Community Options, which includes, PASSR, Case Management agencies and Colorado Choice Transitions.



- b.** Every five years all departments have to review their sections as part of rule, this effects any Pre-Admissions or any type of re-assessment, and this will certainly impact the nursing facility area. With this opportunity we can identify the pain points, what rules do work, what rules don't.
- c.** A survey monkey was sent out broadly to our stakeholder list about the SEP rules, and we can send this out to the NFAC if Jason would like this group to participate. The survey will open through May, and we will be developing with the feedback what rules will be up for changing in the SEP rules, and developing a timeline that we have to submit to the governor by October 2015. This is the opportunity for NFAC to give their perspective about what is not working for the SEP rules. Questions about this?

Question: Are timeframes up for negotiation or is it just the SEP rule themselves?

Tim: If we identify areas that have to be changed, we have to include a timeline to the governor about when we are going to do it.

Question: What about the ten day wait period when you request a LTC 100 wait for PASSR, is this negotiable?

Tim: All of this is up for review. It's also time to think about what the system can actually do. All of it is up for negotiation, as long as we are federally compliant, and the plan will be put together this summer. Feedback is preferred through the survey monkey and not through Tim's e-mail, so he can aggregate the responses. Will send the link of the survey monkey link in a message to Jason, so he can send the link to the NFAC group.

Question: Will you come back to this group and explain what the SEP changes will be?

Tim: We will figure out a communication plan, once Tim receives the feedback via the survey monkey; HCPF will collect it all and make what is going to be the next steps in terms of finalizing the plan. Tim will also be going back to the different stakeholder groups to talk to them and let them know how it's going to proceed.

Question: Will NFAC have a representative on that committee?

Tim: We might do a committee, but we might draft a plan and send that out for review, than have a committee later. When we get to the work and implementing the plan, we then might call for a committee structure to work on different aspects of the SEP rule.



XI. Open Public Comment: Jason Takaki (HCPF)

- a.** An NFAC member brought up a question regarding the home care allowance and how it is applied, as it relates to CCT or in several transitions from a facility to the community. Rule was confusing between the allowance applications on the 5615 and the dollars allocated for transition with CCT. Conclusion would be to seek clarity between CCT and eligibility.

